

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM
ELEVATION CERTIFICATE

O.M.B. No. 3087-0077
Expires July 31, 2012

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

| | | |
|---|--|--|
| BUILDING OWNER'S NAME GENESIS DESIGNER HOMES | FOR INSURANCE COMPANY USE Policy Number | |
| BUILDING STREET ADDRESS (Building Apt., Unit, Suite, and/or Box No.) OR P.O. ROUTE AND BOX NO. 711 EAST BRISTOL K/27 | COMPANY NAIC NUMBER | |
| CITY RICHMOND HILL | STATE GEORGIA | ZIP CODE 31324 |
| PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 460 MARY STREET Phase 1A | | |
| BUILDING USE (e.g. Residential, Non-Residential, Addition, Accessory, etc. Use Classification System if necessary.) RESIDENTIAL | | |
| LATITUDE/LONGITUDE (OPTIONAL) (NAD 1983 - DMS or DDMM.MMM) | HORIZONTAL DATUM NAD 1983 | SOURCE GPS (Type) USES GRID MAP LIDAR |

SECTION B - FLOOD INSURANCE RATE MAP (FIR) INFORMATION

| | | | | | |
|--|---------------------------------|---------------------------------|--|---------------------------------|--|
| B1. FIRP COMMUNITY NAME & COMMUNITY NUMBER RICHMOND HILL 30018 | B2. COUNTY NAME BRYAN | B3. STATE GEORGIA | | | |
| B4. MAP AND PANEL NUMBER Beats - 0063 | B5. SUFFIX G | B6. FIRM DATE 4-17-84 | B7. FIRM PANEL EFFECTIVE REVENUE DATE 8-24-89 | B8. FLOOD ZONE(S) A-1 | B9. BASE FLOOD ELEVATION (Zone AO, see depth of flooding) 4.0 |

B10. Indicate the source of the Base Flood Elevation (BFE) date or base flood depth entered in B9.
 FIR Profile FIRM Community Determined Other (Describe): **Local 8-21-89**

B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 NAVD 1988 Other (Describe):

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Critical Protected Area (CPA)? Yes No
Designation Date:

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are listed on: Construction Drawings Building Under Construction PRETENDED Construction
A new Elevation Certificate will be required when construction of the building is complete.

C2. Building Diagram Number **1** (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

C3. Elevations - Zones A1-A30, AE, AH, A (With BFE), VE, V1-V30, V (With BFE), AR, ARA, ARNE, AR/A1-A30, AR/AH, AR/AO
Complete Item C3a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided at the bottom of each row of Section D or Section G, as appropriate, to document the datum conversion.

Datum **NGVD 1929** Conversion/Comments **N/A**

| | |
|---|--|
| Elevation reference mark used | Does the elevation reference mark used appear on the FIRM? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| <input type="checkbox"/> a) Top of bottom floor (including basement or enclosure) | 17.6 ft. (m) |
| <input type="checkbox"/> b) Top of next higher floor | N/A ft. (m) |
| <input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only) | N/A ft. (m) |
| <input type="checkbox"/> d) Attached garage (top of slab) | 16.7 ft. (m) |
| <input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building | 16.8 ft. (m) |
| <input type="checkbox"/> f) Lowest adjacent grade (LAG) | 15.6 ft. (m) |
| <input type="checkbox"/> g) Highest adjacent grade (HAG) | 15.7 ft. (m) |
| <input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade | N/A sq. ft. (sq. m) |
| <input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3h | N/A sq. ft. (sq. m) |



SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information.

I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the data available.

I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

CERTIFICATE NUMBER

LICENCE NUMBER

1882

| | | | |
|-----------------------------------|---------------------------------------|------------------------------------|--------------------------|
| TITLE LAND SURVEYOR | COMPANY NAME VINCENT HELMLY | | |
| ADDRESS 119 BOSTON Road | CITY SAVANNAH | STATE GA. | ZIP CODE 31405 |
| SIGNATURE Vincent Helmy | DATE 11-11-05 | TELEPHONE (706) 925-3523 | |

SEE REVERSE SIDE FOR CONTINUATION

REPLACES ALL PREVIOUS EDITIONS